



Docket No.: 0879-0296P
(PATENT)

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application of:
Takeshi MISAWA et al.

Application No.: 09/758,423

Confirmation No.: 8555

Filed: January 12, 2001

Art Unit: 2615

For: MULTI-MODAL IMAGE REPRODUCING
APPARATUS AND DIGITAL CAMERA (as
amended)

Examiner: G. V. Selby

AMENDMENT IN RESPONSE TO NON-FINAL OFFICE ACTION

MS Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

INTRODUCTORY COMMENTS

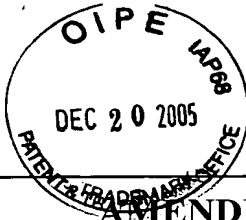
In response to the Office Action dated September 22, 2005, please amend the above-identified U.S. patent application as follows.

This paper includes:


Amendments to the Specification

Amendments to the Claims

Remarks/Arguments



1/5 2615

AMENDMENT TRANSMITTAL LETTER				Docket No. 0879-0296P	
Application No. 09/758,423-Conf. #8555		Filing Date January 12, 2001		Examiner G. V. Selby	
				Art Unit 2615	
Applicants: Takeshi MISAWA et al.					
Invention: IMAGE REPRODUCING APPARATUS AND DIGITAL CAMERA					
MS Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450					
Transmitted herewith is an amendment in the above-identified application.					
The fee has been calculated and is transmitted as shown below.					
CLAIMS AS AMENDED					
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate	
Total Claims	16	- 21 =	0	x	
Independent Claims	11	- 12 =	0	x	
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					
Other fee (please specify):					
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:					0.00
<input checked="" type="checkbox"/> Large Entity <input type="checkbox"/> Small Entity					
<input checked="" type="checkbox"/> No additional fee is required for this amendment.					
<input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of \$ _____. A duplicate copy of this sheet is enclosed.					
<input type="checkbox"/> A check in the amount of \$ _____ to cover the filing fee is enclosed.					
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.					
<input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. <u>02-2448</u> as described below. A duplicate copy of this sheet is enclosed.					
<input checked="" type="checkbox"/> Credit any overpayment.					
<input checked="" type="checkbox"/> Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.					
 Michael R. Cammarata Attorney Reg. No.: 39,491				Dated: <u>December 20, 2005</u>	
BIRCH, STEWART, KOLASCH & BIRCH, LLP 8110 Gatehouse Road Suite 100 East P.O. Box 747 Falls Church, Virginia 22040-0747 (703) 205-8000					